# City of El Cerrito

## Petition Request Form (Page 1 of 2)

## Neighborhood Traffic Management Program (NTMP)

Contact Name: _____ Organization (If applicable): _____

Day Phone: _____ Email: _____ Today's Date: _____

Address: _____

**Describe Issues and Concerns:**

Please indicate traffic issues that concern residents in your neighborhood.

_____ **speeding** _____ **traffic volumes**

_____ **walking/biking** _____ **other**

Please explain further:

_____

_____

_____

_____

_____

Please describe the boundaries of your neighborhood:

_____

_____

_____

Are you aware of any neighborhood associations that represent your area?

_____

**COMPLETE PETITION ON PAGE 2 OF THIS FORM. SEE INSTRUCTIONS BELOW.**

1. The form requires 60 percent approval from the addresses on the project street, which is the block or blocks on which the neighborhood traffic management is being requested.
2. The resident submitting the request form will become the "neighborhood lead" and serve as the primary contact for City staff.
3. The neighborhood lead should make a reasonable effort to contact the property owner and the current resident/business at each address on the project street.
4. Multiple responses from one address will be counted as one response. Multi-family buildings will be counted as one to initiate the NTMP process, but each individual unit will be contacted for input during the remainder of the process.
6. If the responses from a property owner and resident of an address are in conflict, they will not be counted.
7. If the project street crosses jurisdictional boundaries, the neighborhood lead should also make a reasonable effort to contact each address in that jurisdiction. However, those addresses may not necessarily be included in the tally.
8. For a project street that includes extra long blocks (i.e., longer than 900 feet), the approval percentage may be reduced to 55 percent.

**For Staff Use Only** Date Received:

Petition Approval %: _____

Review Action: _____

_____

Additional Comments: _____

_____

Applicant Notified on: _____

*Source: TJKM*

**City of El Cerrito**

**Petition Request Form (Page 2 of 2)**

**Neighborhood Traffic Management Program (NTMP)**

THE CITY OF EL CERRITO

Contact Name: ____________ Phone: ____________ Email: ____________

Address: ____________ City: ____________ Zip: ____________

We, the undersigned, request a meeting to address the following traffic concerns related to vehicle speeds, traffic volumes and/or pedestrian/bicycle comfort and safety, as further described on Page 1 of this form:

____________________________________________

____________________________________________

____________________________________________

____________________________________________

____________________________________________

| No. | Print Name / Signature | Address / Email: | Phone (optional) / Date |
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*Source: TJKM*